

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks:: 0
Number of Copies of CDs:: 0
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: A PROCESS FOR THE MONONITRATION
OF ALKANEDIOLS
Attorney Docket Number:: 2503-1149
Request for Early
Publication?::
Request for Non-Publication?:: No
Suggested Drawing Figure:: 0
Total Drawing Sheets:: 0
Small Entity?:: Yes
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent No
Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: NEVIO
Middle Name::
Family Name:: FRANCESCUCCI
Name Suffix::
City of Residence:: SAN GIOVANI DI CASARSA (PN)
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA CARAVAGGIO, 21
Address::
City of Mailing Address:: SAN GIOVANI DI CASARSA (PN)
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 33070

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: TIZIANO
Middle Name::
Family Name:: SCUBLA
Name Suffix::
City of Residence:: PASIAN DI PRATO
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA BONANNI, 32
Address::
City of Mailing Address:: PASIAN DI PRATO

State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 33037

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: FAUSTO
Middle Name::
Family Name:: GORASSINI
Name Suffix::
City of Residence:: UDINE
State or Province of Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA CODROIPO, 30
Address::
City of Mailing Address:: UDINE
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 33100

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: GRAZIANO
Middle Name::
Family Name:: CASTALDI
Name Suffix::
City of Residence:: BRIONA (NO)
State or Province of Residence::
Country of Residence:: ITALY

Street of Mailing Address:: VIA LIVIA GALLINA 5
Address:::
City of Mailing Address:: BRIONA (NO)
State or Province of Mailing Address:::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: 28072

Correspondence Information

Correspondence Customer Number:: 00466
Number:::

Representative Information

Representative Customer Number::	00466
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP2003/012376	11/6/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
ITALY	MI2002A002410	11/14/02	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::